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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF VIRGINIA	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Frank First name Andrew Middle name Passarelli Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2146		

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De	btor 1 Frank Andrew Pa	ssarelli	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	320 Stokes Creek Dr.	If Debtor 2 lives at a different address:
		Saint Augustine, FL 32095 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Saint Johns County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.
		Explain. (See 28 U.S.C. § 1408.) Live in WDVA for better part of last 180 days.	Explain. (See 28 U.S.C. § 1408.)

Document Page 3 of 66 Frank Andrew Passarelli Debtor 1 Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last 8 years? Yes. **Wester District Of** Virginia (Culpeper, 10/12/17 17-61972 District Chapter 13) When Case number WDVA (Prince William. 4/29/94 94-11673 District Chapter 7.) When Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you District When Case number, if known Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

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Frank Andrew Passarelli Debtor 1 Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Frank Andrew Passarelli Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Page 6 of 66 Document Frank Andrew Passarelli Debtor 1 Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million **\$0 - \$50,000** □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Frank Andrew Passarelli Signature of Debtor 2 Frank Andrew Passarelli Signature of Debtor 1 Executed on October 4, 2019 Executed on MM / DD / YYYY MM / DD / YYYY

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Page 7 of 66 Document Debtor 1 Frank Andrew Passarelli Case number (if known) For your attorney, if you are I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter represented by one for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the If you are not represented by an attorney, you do not need schedules filed with the petition is incorrect. to file this page. /s/ Marshall M. Slayton Date October 4, 2019 Signature of Attorney for Debtor MM / DD / YYYY Marshall M. Slayton VSB#37362 Printed name Slayton Law, PLC Firm name 913 East Jefferson Street

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Email address

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marshall@marshallslayton.com

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Charlottesville, VA 22902 Number, Street, City, State & ZIP Code

Contact phone (434) 979-7900

Bar number & State

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Fill	in this inform	ation to identify your	case:			
Del	otor 1	Frank Andrew Pa	ssarelli			
	0	First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	WESTERN DISTRICT	OF VIRGINIA		
	se number				□ Choo	k if this is an
(II KI	lowiij					ded filing
				'		_
Of	ficial For	m 106Sum				
			and Liabilities a	nd Certain Statistical Information		12/15
info	rmation. Fill o	ut all of your schedul	es first; then complete tl	e are filing together, both are equally responsible f ne information on this form. If you are filing amend k the box at the top of this page.		
		rize Your Assets	·			
					Your a	ssets
						of what you own
1.	Schedule A/	B: Property (Official Fo	orm 106A/B)		\$	0.00
					· —	
			•		\$	24,475.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	24,475.00
Par	t 2: Summa	rize Your Liabilities				
						abilities
					Amoun	t you owe
2.			laims Secured by Property nn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	19,116.20
3.	Schedule E/I	: F: Creditors Who Have	Unsecured Claims (Officia	al Form 106E/F)		_
				ns) from line 6e of Schedule E/F	\$	52,622.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F	\$	118,838.06
				Your total liabilities	\$ \$	190,576.26
Par	t 3: Summa	rize Your Income and	Expenses			
4.		Your Income (Official Foombined monthly incom		e I	\$	7,170.00
5.		Your Expenses (Official onthly expenses from li			\$	4,993.00
Par	t 4: Answei	These Questions for	Administrative and Stat	istical Records		
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. C	heck this box and submit this form to the court with yo	our other sc	hedules.
7.	■ Yes What kind o	f debt do you have?				
-	Your de	ebts are primarily con		debts are those "incurred by an individual primarily for	a personal	, family, or
	☐ Your de		consumer debts. You ha	On for statistical purposes. 28 U.S.C. § 159. We nothing to report on this part of the form. Check the	s <i>box</i> and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1	Frank Andrew	Passarelli	
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Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____5,363.29

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	40,621.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	12,001.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	52,622.00

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Fill in this in	formation to identify your ages	and this filings		
Debtor 1	formation to identify your case			
Deptor 1	Frank Andrew Passard	Middle Name Last Name		
Debtor 2	E. A.			
(Spouse, if filing)	First Name	Middle Name Last Name		
United States	Bankruptcy Court for the: WES	TERN DISTRICT OF VIRGINIA		
Case number				☐ Check if this is an
				amended filing
Official F	Form 106A/B			
Sched	ule A/B: Propert	V		12/15
n each categor	ry, separately list and describe items	s. List an asset only once. If an asset fits in more than one lossible. If two married people are filing together, both are		
nformation. If i		rate sheet to this form. On the top of any additional pages	, write your name and case	number (if known).
	•			
Part 1: Descr	Tibe Each Residence, Building, Land	, or Other Real Estate You Own or Have an Interest In		
. Do you own	or have any legal or equitable interes	est in any residence, building, land, or similar property?		
■ No. Go to	Part 2.			
	ere is the property?			
Part 2: Descr	ibe Your Vehicles			
□ No ■ Yes	s, trucks, tractors, sport utility v	ehicles, motorcycles		
3.1 Make:	Hyundai	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
Model:	Sonata	Debtor 1 only	Creditors Who Have Clair	ns Secured by Property.
Year: Approxi	2015 imate mileage: 56,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	nformation:	☐ At least one of the debtors and another	onino proporty.	portion you out
TAV		_	\$40.40E.00	\$40.40F.00
	ion: 15763 Auburn Rd, per VA 22701	Check if this is community property (see instructions)	\$12,425.00	\$12,425.00
Examples: B ■ No □ Yes 5 Add the d	Soats, trailers, motors, personal w	nd other recreational vehicles, other vehicles, and a atercraft, fishing vessels, snowmobiles, motorcycle accernication with the state of the state	essories entries for	\$12,425.00
	ibe Your Personal and Household I			
Do you own	or have any legal or equitable i	nterest in any of the following items?	j [Current value of the portion you own? On not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 1

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Debtor 1	Frank Andrew Passarelli Case numb	er (if known)
	hold goods and furnishings oles: Major appliances, furniture, linens, china, kitchenware	
	s. Describe	
	Appliances Location: Storage Unit	\$1,175.00
	Kitchen furniture Location: Storage Unit	\$500.00
	Kitchenware Location: Storage Unit	\$750.00
	Living room furniture Location: Storage Unit	\$750.00
	Bedroom furniture Location: Storage Unit	\$1,200.00
	Miscelleneous household goods and furnishings Location: Storage Unit	\$1,800.00
	Linens Location: Storage Unit	\$50.00
	Home office furniture Location: Storage Unit	\$750.00
	Lawn and garden furniture, equipment and tools Location: Storage Unit	\$150.00
□ No	pnics bles: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scann including cell phones, cameras, media players, games blescribe	ers; music collections; electronic devices
	3 TVs Location: Storage Unit	
	Computer, copier, cell phone, printer, fax machine Location: 320 Stokes Creek Dr., Saint Augustine FL 32095	\$2,150.00
Exam □ No	tibles of value oles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; other collections, memorabilia, collectibles because it is a collection of the collect	stamp, coin, or baseball card collections;
	Books	
	Location: 320 Stokes Creek Dr., Saint Augustine FL 32095	\$200.00

Debtor 1 Frank Andrew Passarelli Case number (if known) 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Yes. Describe..... Golf clubs, board games \$150.00 Location: 320 Stokes Creek Dr., Saint Augustine FL 32095 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... **Used clothing** \$900.00 Location: 320 Stokes Creek Dr., Saint Augustine FL 32095 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... Watch \$10.00 Location: 320 Stokes Creek Dr., Saint Augustine FL 32095 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$1.00 Location: 320 Stokes Creek Dr., Saint Augustine FL 32095 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$10,536.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No

Official Form 106A/B Schedule A/B: Property page 3

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Page 13 of 66 Document Frank Andrew Passarelli Case number (if known) Debtor 1 Cash Location: 15763 Auburn Rd. Culpeper \$50.00 VA 22701 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... BB&T \$100.00 17.1. Checking **BB&T Bank** \$150.00 17.2. Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No Institution or issuer name: ■ Yes..... Miscellaneous investments (savings bonds mutual funds, stocks, \$1.00 savings accounts, etc.) 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

Official Form 106A/B Schedule A/B: Property page 4

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Debtor 1 Frank Andrew Passarelli Case number (if known) 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements $\hfill \square$ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Income tax refunds **Federal** \$1.00 Income tax refunds Va. state \$1.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ☐ No Yes. Give specific information.. \$1.00 Garnished funds or other preferential transfers to creditors Net proceeds from sale of miscellaneous housenold goods \$1,208.00 and furniture by JLR Auctions. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No $\hfill\square$ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. □ No Yes. Give specific information..

Official Form 106A/B Schedule A/B: Property page 5

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Case 19-62091 Doc 1 Filed 10/04/19 Entered 10/04/19 16:03:59 Document Page 15 of 66 Frank Andrew Passarelli Case number (if known) Debtor 1 Inchoate interest in inheritance property \$1.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Π Nο Yes. Describe each claim....... \$1.00 Earned but unpaid wages from employer(s) 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims □ No Yes. Describe each claim....... Unknown Personal injury and/or wrongful death claim(s) for damages 35. Any financial assets you did not already list No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,514.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00

Official Form 106A/B Schedule A/B: Property page 6

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Deb	tor 1 Frank Andrew Passarelli		Case number (if known)	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$12,425.00		
57.	Part 3: Total personal and household items, line 15	\$10,536.00		
58.	Part 4: Total financial assets, line 36	\$1,514.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$24,475.00	Copy personal property total	\$24,475.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$24,475.00

Official Form 106A/B Schedule A/B: Property

page 7

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Fill in this infor	mation to identify your	case:			
Debtor 1	Frank Andrew Pa	ssarelli			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF VIRGINIA		
Case number					
(if known)					Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Appliances Location: Storage Unit	\$1,175.00		\$1,175.00	Va. Code Ann. § 34-26(4a)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Kitchen furniture Location: Storage Unit	\$500.00		\$500.00	Va. Code Ann. § 34-26(4a)
Line from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit	
Kitchenware Location: Storage Unit	\$750.00		\$750.00	Va. Code Ann. § 34-26(4a)
Line from Schedule A/B: 6.3			100% of fair market value, up to any applicable statutory limit	
Living room furniture Location: Storage Unit	\$750.00		\$750.00	Va. Code Ann. § 34-26(4a)
Line from Schedule A/B: 6.4			100% of fair market value, up to any applicable statutory limit	
Bedroom furniture Location: Storage Unit	\$1,200.00		\$1,200.00	Va. Code Ann. § 34-26(4a)
Line from Schedule A/B: 6.5			100% of fair market value, up to any applicable statutory limit	

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or 1 Frank Andrew Passarelli			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Miscelleneous household goods and furnishings	\$1,800.00	-	\$625.00	Va. Code Ann. § 34-26(4a)
Location: Storage Unit			100% of fair market value, up to	
ine from Schedule A/B: 6.6			any applicable statutory limit	
Miscelleneous household goods and	\$1,800.00		\$1,175.00	Va. Code Ann. § 34-4
urnishings Location: Storage Unit			100% of fair market value, up to	
ine from Schedule A/B: 6.6			any applicable statutory limit	
inens	\$50.00		\$50.00	Va. Code Ann. § 34-4
Location: Storage Unit Line from Schedule A/B: 6.7			100% of fair market value, up to	
Line Hom Schedule AVD. G.F		_	any applicable statutory limit	
Home office furniture	\$750.00		\$750.00	Va. Code Ann. § 34-4
Location: Storage Unit Line from Schedule A/B: 6.8			100% of fair market value, up to	
Line nom Schedule A/D. 4.4		_	any applicable statutory limit	
_awn and garden furniture,	\$150.00		\$150.00	Va. Code Ann. § 34-4
equipment and tools Location: Storage Unit			100% of fair market value, up to	
ine from Schedule A/B: 6.9			any applicable statutory limit	
3 TVs	\$2,150.00		\$2,150.00	Va. Code Ann. § 34-4
Location: Storage Unit			·	
Computer, copier, cell phone, printer,		_	100% of fair market value, up to any applicable statutory limit	
fax machine				
Location: 320 Stokes Creek Dr., Saint Augustine FL 32095				
Line from Schedule A/B: 7.1				
Books	\$200.00		\$200.00	Va. Code Ann. § 34-4
Location: 320 Stokes Creek Dr., Saint Augustine FL 32095			100% of fair market value, up to	
ine from Schedule A/B: 8.1		_	any applicable statutory limit	
Golf clubs, board games	\$150.00		\$150.00	Va. Code Ann. § 34-4
Location: 320 Stokes Creek Dr., Saint Augustine FL 32095			100% of fair market value, up to	
Line from Schedule A/B: 9.1			any applicable statutory limit	
Jsed clothing	\$900.00		\$900.00	Va. Code Ann. § 34-26(4)
Location: 320 Stokes Creek Dr., Saint Augustine FL 32095		_		
ine from Schedule A/B: 11.1		_	100% of fair market value, up to any applicable statutory limit	
Watch	\$10.00		\$10.00	Va. Code Ann. § 34-4
Location: 320 Stokes Creek Dr., Saint Augustine FL 32095		_		
¬uyuōiiiiԵ ୮∟ JZUJJ		u	100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 12.1 Dog	\$1 00		\$1.00	Va. Code Ann. § 34-26(5)
Line from <i>Schedule A/B</i> : 12.1 Dog Location: 320 Stokes Creek Dr., Saint Augustine FL 32095	\$1.00	=	\$1.00 100% of fair market value, up to	Va. Code Ann. § 34-26(5)

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tor 1 Frank Andrew Passarelli Brief description of the property and line on	Current value of the	Am	Case number (if known) ount of the exemption you claim	Specific laws that allow exemption
Schedule A/B that lists this property	portion you own Copy the value from		eck only one box for each exemption.	opecific laws that allow exemption
	Schedule A/B	One	ок ону оне вох ю васн вхетіриоп.	
Cash Location: 15763 Auburn Rd,	\$50.00		\$50.00	Va. Code Ann. § 34-4
Culpeper VA 22701 Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit	
Checking: BB&T Line from Schedule A/B: 17.1	\$100.00		\$100.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
Savings: BB&T Bank Line from Schedule A/B: 17.2	\$150.00		\$150.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
Miscellaneous investments (savings bonds mutual funds, stocks, savings	\$1.00		\$1.00	Va. Code Ann. § 34-4
accounts, etc.) Line from Schedule A/B: 18.1			100% of fair market value, up to any applicable statutory limit	
Federal: Income tax refunds Line from Schedule A/B: 28.1	\$1.00		\$1.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
Va. state: Income tax refunds Line from Schedule A/B: 28.2	\$1.00		\$1.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
Garnished funds or other preferential transfers to creditors	\$1.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	
Net proceeds from sale of miscellaneous housenold goods and	\$1,208.00		\$1,208.00	Va. Code Ann. § 34-4
furniture by JLR Auctions. Line from Schedule A/B: 30.2			100% of fair market value, up to any applicable statutory limit	
Inchoate interest in inheritance property	\$1.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 32.1			100% of fair market value, up to any applicable statutory limit	
Earned but unpaid wages from employer(s)	\$1.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	
Personal injury and/or wrongful death claim(s) for damages	Unknown	•	Unknown	Va. Code Ann. § 34-28.1
Line from Schedule A/B: 34.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Frank Andrew Passarelli

Case number (if known)

3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

	0.01	110	ank Andrew 1 assarem	Case Hamber (II Miewil)	
3.			claiming a homestead exemption of more than \$170,350? o adjustment on 4/01/22 and every 3 years after that for cases filed on or	after the date of adjustment.)	
		No			
		Yes.	Did you acquire the property covered by the exemption within 1,215 day	s before you filed this case?	
			No		
			Yes		

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	this informatio	n to identify you	r case:			
Debto		rank Andrew P				
Dahte		st Name	Middle Name Last Name			
Debto (Spouse		st Name	Middle Name Last Name			
United	l States Bankrup	otcy Court for the:	WESTERN DISTRICT OF VIRGINIA			
Case	number					
(if known	· · · · · <u> </u>				☐ Check	if this is an
					amend	ded filing
Offic	ial Form 10	06D				
			Who Have Claims Secure	ed by Property	/	12/15
				<u> </u>		tion If more chose
s need	ed, copy the Addi		f two married people are filing together, both are ut, number the entries, and attach it to this form			
	(if known).	claims secured by	vour property?			
_	•	-	is form to the court with your other schedules	You have nothing else to	report on this form	
_		f the information b	•	. Tou have nothing else to	report on this form.	
			OCIOW.			
Part 1		cured Claims		Column A	Column B	Column C
for eac	h claim. If more th	an one creditor has	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. A al order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
Z.I I -	JSAA Federal	l Savings	Barrier de la companya de la company	\$19,116.20	\$12,425.00	\$6,691.20
	Bank Creditor's Name		Describe the property that secures the claim:	319,110.20	Ψ12,423.00	\$0,091.20
			2015 Hyundai Sonata 56,000 miles TAV			
			Location: 15763 Auburn Rd,			
	P.O. Box 2514	-	Culpeper VA 22701 As of the date you file, the claim is: Check all that			
	_ehigh Valley	, PA	apply.			
_	18002-5145		Contingent			
١	Number, Street, City, S	State & Zip Code	Unliquidated			
Who o	wes the debt?	Check one.	Disputed Nature of lien. Check all that apply.			
■ Deb	otor 1 only		■ An agreement you made (such as mortgage or	secured		
☐ Deb	otor 2 only		car loan)			
☐ Deb	otor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechanic's lien))		
☐ At le	east one of the del	otors and another	☐ Judgment lien from a lawsuit			
☐ Che	eck if this claim re mmunity debt	elates to a	Other (including a right to offset)			
co	ebt was incurred	3/16/15	Last 4 digits of account number 885	3		
Date d	the dollar value o	of your entries in Co	olumn A on this page. Write that number here:	\$19,11	6.20	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Write that number here:

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FI	l in this infor	mation to identify your	case:					
De	ebtor 1	Frank Andrew Pas						
_		First Name	Middle Name	Last Nam	е			
	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Nam	e			
		ankruptcy Court for the:	WESTERN DISTRICT C					
	ase number (nown)						□ Chook	if this is an
(11 K	anown)						_	if this is an led filing
							amone	ioa iiii ig
Of	ficial Forr	m 106E/F						
Sc	chedule E	F/F: Creditors W	ho Have Unsecu	red Claim	S			12/15
3e a	as complete an	d accurate as possible. Us	e Part 1 for creditors with Pl	RIORITY claims a	nd Part 2 fo	or creditors with NON	PRIORITY claims. L	ist the other party to
nan	ne and case nu	mber (if known).	e. If you have no information	n to report in a Pa	art, do not f	ile that Part. On the to	op of any additional	pages, write your
1.		All of Your PRIORITY Un						
1.	No. Go to f	ors have priority unsecured	a ciaims against you?					
		≥aπ 2.						
_	Yes.		. W Pro . I			r d		
۷.	identify what ty possible, list th	pe of claim it is. If a claim ha e claims in alphabetical orde	If a creditor has more than of s both priority and nonpriority or according to the creditor's naticular claim, list the other cre	amounts, list that a	claim here a	nd show both priority a	nd nonpriority amoun	ts. As much as
	(For an explan	ation of each type of claim, s	ee the instructions for this forr	m in the instruction	booklet.)			
					,	Total claim	Priority amount	Nonpriority amount
2.1	Culpen	er County Treasurer	Last 4 digits of	account number		\$1.00	\$1.00	
		reditor's Name					Ψ1.00	Ψ0.00
		ox 1447	When was the o	debt incurred?	2019			
		er, VA 22701 Street City State Zip Code	As of the date v	ou file, the claim	is: Check a	II that apply		
		ed the debt? Check one.	☐ Contingent	,		triat apply		
	Debtor 1	only	☐ Unliquidated					
	Debtor 2	only	☐ Disputed					
	Debtor 1	and Debtor 2 only		TY unsecured cla	aim:			
		ne of the debtors and anothe	n Domestic su	pport obligations				
	_	this claim is for a commun	_	ertain other debts	ou owe the	government		
	- Oncok II	and diaminis for a communi				90.0		
	Is the claim	subject to offset?	☐ Claims for de		iury while vo	u were intoxicated		
	Is the claim ■ No	subject to offset?	☐ Claims for de ☐ Other. Speci	eath or personal in	jury while yo	u were intoxicated		

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		Case numb			
Internal Revenue Service	Last 4 digits of account number		\$11,000.00	\$11,000.00	\$0.00
Priority Creditor's Name Insolvency Units 400 North Eighth Street, Box 76	When was the debt incurred?	2017-2018			
	As of the date you file the claim	is: Check all tha	t annly		
no incurred the debt? Check one.		13. Officer all the	к арріу		
Debtor 1 only	_				
•	`				
•	'	aim:			
,	☐ Domestic support obligations				
	_	you owe the gove	ernment		
the claim subject to offset?		_			
No	Other. Specify				
Yes	Income ta	kes			
Nancy Lee Wheeler	Last 4 digits of account number		\$40,621.00	\$40,621.00	\$0.00
6946 Louisa Road	When was the debt incurred?				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all tha	t apply		
no incurred the debt? Check one.	☐ Contingent				
Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	aim:			
At least one of the debtors and another	Domestic support obligations				
Check if this claim is for a community debt the claim subject to offset?					
No	Other. Specify				
Yes	\$30,621 pl	us four miss	ed support pay		
Virginia Dept. of Taxation	Last 4 digits of account number		\$1,000.00	\$1,000.00	\$0.00
Priority Creditor's Name Bankruptcy Dept.	Last 4 digits of account number When was the debt incurred?	2018	\$1,000.00	\$1,000.00	\$0.00
Priority Creditor's Name Bankruptcy Dept. P.O. Box 2156 Richmond, VA 23218-2156 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim			\$1,000.00	\$0.00
Priority Creditor's Name Bankruptcy Dept. P.O. Box 2156 Richmond, VA 23218-2156 Number Street City State Zip Code no incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim Contingent			\$1,000.00	\$0.00
Priority Creditor's Name Bankruptcy Dept. P.O. Box 2156 Richmond, VA 23218-2156 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated			\$1,000.00	\$0.00
Priority Creditor's Name Bankruptcy Dept. P.O. Box 2156 Richmond, VA 23218-2156 Number Street City State Zip Code no incurred the debt? Check one. Debtor 1 only Debtor 2 only	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed	is: Check all tha		\$1,000.00	\$0.00
Priority Creditor's Name Bankruptcy Dept. P.O. Box 2156 Richmond, VA 23218-2156 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured claim	is: Check all tha		\$1,000.00	\$0.00
Priority Creditor's Name Bankruptcy Dept. P.O. Box 2156 Richmond, VA 23218-2156 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations	is: Check all tha	t apply	\$1,000.00	\$0.00
Priority Creditor's Name Bankruptcy Dept. P.O. Box 2156 Richmond, VA 23218-2156 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations Taxes and certain other debts	is: Check all that aim:	t apply	\$1,000.00	\$0.00
Priority Creditor's Name Bankruptcy Dept. P.O. Box 2156 Richmond, VA 23218-2156 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations	is: Check all that aim:	t apply	\$1,000.00	\$0.00
	Insolvency Units 400 North Eighth Street, Box 76 Richmond, VA 23219 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt the claim subject to offset? No Yes Nancy Lee Wheeler Priority Creditor's Name 6946 Louisa Road Gordonsville, VA 22942 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt the claim subject to offset? No	Insolvency Units 400 North Eighth Street, Box 76 Richmond, VA 23219 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt the claim subject to offset? No Yes When was the debt incurred? As of the date you file, the claim Contingent Contingent Disputed Type of PRIORITY unsecured claims to prove the debt or personal in Domestic support obligations Taxes and certain other debts or claims for death or personal in Domestic support obligations Taxes and certain other debts or claims for death or personal in Domestic support obligations Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Domestic support obligations When was the debt of account number Domestic support obligations Type of PRIORITY unsecured claims Domestic support obligations Type of PRIORITY unsecured claims Domestic support obligations Domestic support obligations Type of PRIORITY unsecured claims Domestic support obligations Domestic support obligations Taxes and certain other debts Domestic support obligations Type of PRIORITY unsecured claims Domestic support obligations Domestic support obligations Type of PRIORITY unsecured claims Domestic support obligations Domestic s	Insolvency Units 400 North Eighth Street, Box 76 Richmond, VA 23219 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt the claim subject to offset? No Yes No Nancy Lee Wheeler Priority Creditor's Name 6946 Louisa Road Gordonsville, VA 22942 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Yes Last 4 digits of account number Priority Creditor's Name 6946 Louisa Road Gordonsville, VA 22942 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt the claim subject to offset? No Yes Spousal support (balai \$30,621 plus four miss	Insolvency Units 400 North Eighth Street, Box 76 Richmond, VA 23219 Number Street City State Zip Code to incurred the debt? Check one. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Taxes and certain other debts you owe the government Check if this claim is for a community debt to incurred the debt? Name Contingent Check all that apply Contingent Check if this claim is for a community debt the claim subject to offset? Check if this claim is for a community debt the claim subject to offset? Check one. Contingent Check if this claim is for a community debt in curred? Check if this claim is for a community debt in curred? Contingent C	Insolvency Units 400 North Eighth Street, Box 76 Richmond, VA 23219 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt to incurred the debt? Check one. No Yes Nancy Lee Wheeler Priority Creditor's Name 6946 Louisa Road Gordonsville, VA 22942 Number Street City State Zip Code to incurred the debt? Check one. Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated When was the debt incurred? Income taxes Nancy Lee Wheeler Priority Creditor's Name 6946 Louisa Road Gordonsville, VA 22942 Number Street City State Zip Code to incurred the debt? Check one. Contingent Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt the claim subject to offset? No Contingent Domestic support obligations Type of PRIORITY unsecured claim: Domestic support obligations Type of PRIORITY unsecured claim: Type of PRIORITY unsecured claim: Check if this claim is for a community debt the claim subject to offset? No Spousal support (balance from prior BK was \$30,621 plus four missed support payments post

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority

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Debtor	1 Frank Andrew Passarelli		Case number (if known)				
	secured claim, list the creditor separately for each clain n one creditor holds a particular claim, list the other c t 2.						
				Total claim			
4.1	American infoSource LP, agent for Nonpriority Creditor's Name	Last 4 digits of account number					
	Verizon PO Box 248848 Oklahoma City, OK 73124-8848	When was the debt incurred?		-			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Cell phone	service	-			
4.2	Capital One Bank USA N.A. Nonpriority Creditor's Name	Last 4 digits of account number		\$1,983.00			
	2365 Northside Drive, Ste. 300 San Diego, CA 92108	When was the debt incurred?	-				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	0 0 1	ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharin					
	Yes	Other. Specify Credit card		-			
4.3	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	7582	\$498.00			
	Attn: Bankruptcy Department Po Box 98873	When was the debt incurred?	Opened 07/19 Last Active 8/04/19				
	Las Vegas, NV 89193 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	_					
	Debtor 1 only	Contingent					
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	L. L. C.				
	At least one of the debtors and another						
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	Other Specify Credit Card					
	— 103	= Umer Specify Citalit Cald	•				

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Debtor	1 Frank Andrew Passarelli	Case number (if known)				
4.4	First PREMIER Bank Nonpriority Creditor's Name	Last 4 digits of account number	0244	\$224.00		
	Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	Opened 12/18 Last Active 8/04/19	-		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	l	-		
4.5	John Goetz Law, PLC	Last 4 digits of account number		\$1,893.06		
	Nonpriority Creditor's Name 86 W. Shirley Ave. Warrenton, VA 20186	When was the debt incurred?		-		
	Number Street City State Zip Code	As of the date you file, the claim i				
	Who incurred the debt? Check one.					
	Debtor 1 only					
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	□ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Dismissed	bankruptcy	-		
4.6	John H. Kitzmann Nonpriority Creditor's Name	Last 4 digits of account number		\$600.00		
	21 East High St. Charlottesville, VA 22902	When was the debt incurred?		-		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify Attorney's	fees	-		

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Debtor	1 Frank Andrew Passarelli	Case number (if known)					
4.7	Marlyn Jean Costanzo	Last 4 digits of account number	\$5,000.00				
4.1	Nonpriority Creditor's Name 320 Strokes Creek Dr Saint Augustine, FL 32095	When was the debt incurred?	12/3/2016	\$3,000.00			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Loan					
4.8	Midland Funding LLC	Last 4 digits of account number		\$884.00			
	Nonpriority Creditor's Name PO Box 2001 Warren, MI 48090	When was the debt incurred?					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only						
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another						
	\square Check if this claim is for a community	☐ Check if this claim is for a community ☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Debt Buyer					
4.9	NetCredit Nonpriority Creditor's Name	Last 4 digits of account number	0730	\$9,308.00			
	175 W. Jackson Blvd., Suite 1000 Chicago, IL 60604	When was the debt incurred?	Opened 03/19 Last Active 6/14/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes						

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Frank Andrew Passarelli	Case number (if known)				
Portfolio Recovery Assoc., LLC	Lord Addition of account assessed	\$2,757.00			
Nonpriority Creditor's Name 140 Corporate Blvd.	Last 4 digits of account number When was the debt incurred?	φ2,737.00			
Norfolk, VA 23502	- As of the later of the three later to the second				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
lebt	☐ Obligations arising out of a separation agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Debt buyer				
Quantum3 Group LLC	Last 4 digits of account number	\$17,270.00			
Nonpriority Creditor's Name		, ,			
PO Box 788	When was the debt incurred?				
Kirkland, WA 98083-0788 lumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply				
Debtor 1 only	☐ Contingent				
Debtor 2 only	□ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
Check if this claim is for a community	☐ Student loans				
lebt	☐ Obligations arising out of a separation agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Debt Buyer				
ΓD Bank USA, NA	Last 4 digits of account number	\$3,075.00			
Nonpriority Creditor's Name					
P.O. Box 9500	When was the debt incurred?				
Minneapolis, MN 55440 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Vho incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
lebt	☐ Obligations arising out of a separation agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	Other Specify Credit card				

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Frank Andrew Passarelli	Cas		
The Fauquier Bank	Lock A distinct of account number Of	001	\$8,498.00
Nonpriority Creditor's Name	Last 4 digits of account number		\$0,490.00
10 Courthouse Square Warrenton, VA 20188	When was the debt incurred? 8/	12/2019	
Number Street City State Zip Code	As of the date you file, the claim is: C	heck all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured cla	im:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separation report as priority claims	n agreement or divorce that you did not	
No	Debts to pension or profit-sharing pla	ans, and other similar debts	
☐ Yes	Unpaid balanc Other. Specify 15763 Auburn	e due after short sale of Rd. Culpeper, VA 22701-5515	
USAA Federal Savings Bank	Last 4 digits of account number		\$32,415.00
Nonpriority Creditor's Name P.O. Box 25145 Lehigh Valley, PA 18002-5145	When was the debt incurred?		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: C	heck all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured cla	im:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separation of the properties of th	n agreement or divorce that you did not	
No	Debts to pension or profit-sharing pla	ans, and other similar debts	
Yes	Other. Specify Credit card		
Wells Fargo Bank, N.A.	Last 4 digits of account number		\$16,272.00
Nonpriority Creditor's Name PO Box 51174 Los Angeles, CA 90051	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim is: C	heck all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	im:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation	n agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing pla	ans, and other similar debts	
☐ Yes	■ Other. Specify Credit card		

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Debtor 1	Frank An	drew Passarelli		Case nu	umber (if	known)		
4.1	Iolle Farae	Card Sarvicas	Lord Polymer					\$17,954.00
<u> </u>	onpriority Cred	ditor's Name	Last 4 digits of account number	r 		_		Φ17,954.00
Р	.O. Box 92	210	When was the debt incurred?				_	
		s, IA 50306 City State Zip Code	As of the date you file, the clain	n is: Check	all that a	nnly		
		the debt? Check one.	no or the date you me, the claim	. IO. Oncor	t all triat a	PPIY		
	Debtor 1 on	V	☐ Contingent					
	Debtor 2 on	•	☐ Unliquidated					
		d Debtor 2 only	☐ Disputed					
		of the debtors and another	Type of NONPRIORITY unsecur	ed claim:				
	_	s claim is for a community	☐ Student loans					
de	ebt	•	☐ Obligations arising out of a se	paration ag	reement o	or divorce that you did no	t	
		bject to offset?	report as priority claims					
	No		Debts to pension or profit-shar	•		similar debts		
	Yes		Other. Specify Credit car	d purch	ases		_	
Part 3:	List Others	s to Be Notified About a Deb	ot That You Already Listed					
is trying have mo	to collect fro	m you for a debt you owe to so	bout your bankruptcy, for a debt that meone else, list the original creditor you listed in Parts 1 or 2, list the ad r submit this page.	in Parts 1	or 2, ther	n list the collection ager	ncy here. Si	milarly, if you
Name and			On which entry in Part 1 or Part 2 did yo					
484 Viki	Scott PLL	.6				with Priority Unsecured C		
Suit 203	•			Part 2:	Creditors	with Nonpriority Unsecure	ed Claims	
Winston	Salem, V		4 disits of					
			Last 4 digits of account number					
Name and			On which entry in Part 1 or Part 2 did yo		•			
PO Box		nagement, Inc.				with Priority Unsecured C		
	MI 48090			Part 2:	Creditors	with Nonpriority Unsecure	ed Claims	
			Last 4 digits of account number					
Name and	Address	(On which entry in Part 1 or Part 2 did yo	ou list the o	riginal cre	ditor?		
	USA, NA					with Priority Unsecured C		
	nstein & Ri estern Ave			Part 2:	Creditors	with Nonpriority Unsecure	ed Claims	
	WA 98121							
		I	Last 4 digits of account number					
Part 4:	Add the A	mounts for Each Type of Un	secured Claim					
6. Total the		certain types of unsecured clair	ms. This information is for statistical	reporting	purpose	s only. 28 U.S.C. §159. /	Add the amo	ounts for each
1,000.						Total Claim		
	6a.	Domestic support obligations		6a.	\$	40,621.0	00	
Total						•		
claims from Part 1	1 6b.	Taxes and certain other debts	you owe the government	6b.	\$	12,001.0	00	
	6c.	Claims for death or personal i	njury while you were intoxicated	6c.	\$	0.0		
	6d.	Other. Add all other priority unse	ecured claims. Write that amount here.	6d.	\$	0.0	00	
	6e.	Total Priority. Add lines 6a thro	ough 6d.	6e.	\$	52,622.0	00	
						Total Claim		
	6f.	Student loans		6f.	\$	0.0	00	
Total claims								
from Part 2	2 6g.		eparation agreement or divorce that	6g.	\$	0.0	00	
	6h.	you did not report as priority of Debts to pension or profit-sha	claims aring plans, and other similar debts	6h.	\$ —	0.0		
	6i.		unsecured claims. Write that amount	6i.	\$	118,838.0		

Official Form 106 E/F

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Debtor 1	Frank And	drew Passarelli	Case nui	mber (if known)		
		here.				
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	118,838.06	

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Fill in this infor	mation to identify your	case:		
Debtor 1	Frank Andrew Pa			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT C	OF VIRGINIA	
Case number				
(if known)				 c if this is

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_

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	- I A I - D				
Debtor 1	Frank Andrew Pa	ISSAREIII Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	WESTERN DISTRICT C	OF VIRGINIA		
Case number					☐ Check if this is an
					amended filing
Official F	orm 106H				
	e H: Your Cod	ebtors			12/15
■ No □ Yes 2. Within the Arizona, Co ■ No. Go □ Yes. Did	he last 8 years, have you alifornia, Idaho, Louisiana to line 3. d your spouse, former spor	, Nevada, New Mexico, Puduse, or legal equivalent live	operty state or territor erto Rico, Texas, Wash with you at the time?	ry? (<i>Community propert</i> iington, and Wisconsin.)	v states and territories include
1 11		if that person is a guarant I Form 106E/F), or Schedu			a anadikan an Oakadala B (Officia
Form 106l out Colun	nn 2.	,	ule G (Official Form 10		Schedule E/F, or Schedule G to fi
Form 106l out Colun		IP Code	ule G (Official Form 10		Schedule E/F, or Schedule G to fi
Form 106l out Colun Colu Name	mn 1: Your codebtor	IP Code	ule G (Official Form 10	Column 2: The cre Check all schedule	Schedule E/F, or Schedule G to find to to whom you owe the debt is that apply:
Form 106l out Colun	nn 2. mn 1: Your codebtor Number, Street, City, State and Z	IP Code	ule G (Official Form 10	Column 2: The cre	Schedule E/F, or Schedule G to find the debt of the de
Form 106l out Colum Colum Name	nn 2. mn 1: Your codebtor Number, Street, City, State and Z	IP Code	ule G (Official Form 10	Column 2: The cre Check all schedule Schedule D, line	Schedule E/F, or Schedule G to find to to whom you owe the debt as that apply: e
Form 106l out Colum Colum Name	nn 2. mn 1: Your codebtor Number, Street, City, State and Z	IP Code State	ule G (Official Form 10	Column 2: The cre Check all schedule Schedule D, line Schedule E/F, I	Schedule E/F, or Schedule G to f ditor to whom you owe the debt sthat apply:
Form 106I out Columname Columname 3.1 Name Numb City	nn 2. mn 1: Your codebtor Number, Street, City, State and Z		, 	Column 2: The cre Check all schedule Schedule D, line Schedule E/F, I Schedule G, line	Schedule E/F, or Schedule G to f ditor to whom you owe the debt is that apply:
Form 106I out Columname Columname 3.1 Name	mn 1: Your codebtor Number, Street, City, State and Z		, 	Column 2: The cre Check all schedule Schedule D, line Schedule E/F, I Schedule G, line Schedule D, line	Schedule E/F, or Schedule G to f ditor to whom you owe the debt is that apply:
Solution 106 out Columname Columname 3.1 Name Numb City	mn 1: Your codebtor Number, Street, City, State and Z		, 	Column 2: The cre Check all schedule Schedule D, line Schedule E/F, I Schedule G, line	Schedule E/F, or Schedule G to f
Solut Columname 3.1 Name Numb City	mn 1: Your codebtor Number, Street, City, State and Z		, 	Column 2: The cre Check all schedule Schedule D, line Schedule E/F, I Schedule G, line Schedule D, line Schedule D, line	Schedule E/F, or Schedule G to f

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Fill	in this information to identify your c	ase:				I				
		ew Passarelli			_					
	otor 2				_					
Uni	ted States Bankruptcy Court for the	: WESTERN DISTRICT	OF VIRGINIA							
	se number 					□ A		ed filing ent showin	g postpetition	
\bigcirc	fficial Form 106l					_			ollowing date:	
	chedule I: Your Inc	omo				N	IM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing wi	ng jointly, and your ith you, do not inclu	spouse i de inforr	s liv nati	ing with on about	you, incl your spo	ude informuse. If m	nation about ore space is	your needed,
Par	t 1: Describe Employment									
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job,	Fundament status	☐ Employed				☐ Employed			
	attach a separate page with information about additional	Employment status	■ Not employed				☐ Not employed			
	employers.	Occupation	Retired							
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed the	here?				_			
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to r	eport for	any	line, write	\$0 in the	space. In	clude your no	n-filing
,	u or your non-filing spouse have mo e space, attach a separate sheet to	1 7 7	ombine the informatio	n for all e	mpl	oyers for	that perso	on the li	nes below. If	you need
						For Del	otor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

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Deb	tor 1	Frank Andrew Passarelli		_		Case	number (<i>if ki</i>	nown)					
						For	Debtor 1			Debtor -filing s			
	Cor	by line 4 here		4.		\$	(0.00	\$	-illing s	N/A	_	
_						· —			· —			<u>-</u>	
5.	List	all payroll deductions:											
	5a.	Tax, Medicare, and Social Secur	-	58		\$		0.00	\$		N/A	_	
	5b.	Mandatory contributions for retin	•	5h		\$_		0.00	\$_		N/A	_	
	5c.	Voluntary contributions for retire		50		\$_		0.00	\$_		N/A	_	
	5d. 5e.	Required repayments of retirements of retirements and a second retirements of ret	ent fund loans	50 50		\$_ \$		0.00 0.00	\$		N/A N/A	_	
	5f.	Domestic support obligations		5f		\$ -		0.00	\$		N/A N/A	_	
	5g.	Union dues		5 <u>.</u>		\$_		0.00	\$_		N/A	_	
	5h.	Other deductions. Specify:			h.+	· : —			+ \$		N/A	_	
6.	Add	I the payroll deductions. Add lines	5a+5b+5c+5d+5e+5f+5g+5h.	— 6.		\$	(0.00	\$		N/A	_	
7.		culate total monthly take-home pay		7.		\$	(0.00	\$		N/A	_	
8.		all other income regularly received				Ť —			· —		14/7	_	
0.	8a.	Net income from rental property											
		profession, or farm	-										
		Attach a statement for each proper											
		receipts, ordinary and necessary b monthly net income.	usiness expenses, and the total	88	a.	\$	(0.00	\$		N/A		
	8b.	Interest and dividends		81		\$_		0.00	\$		N/A	_	
	8c.		ou, a non-filing spouse, or a dependen			· —			· —			_	
		regularly receive											
			child support, maintenance, divorce	0.	_	¢.	,		¢		NI/A		
	8d.	settlement, and property settlemen Unemployment compensation	. .	80 80		\$_ \$		0.00	\$		N/A N/A	_	
	8e.	Social Security		86		\$ -	2,499		\$ 		N/A N/A	_	
	8f.	Other government assistance the	at you regularly receive	00	٠.	Ψ_	2,433	.00	Ψ		11//	_	
	· · ·	Include cash assistance and the va that you receive, such as food stan Nutrition Assistance Program) or h	ulue (if known) of any non-cash assistanc nps (benefits under the Supplemental										
		Specify:		8f		\$_		0.00	\$		N/A	_	
	8g.	Pension or retirement income		8(g.	\$	4,471	.00	\$		N/A	_	
	8h.	Other monthly income. Specify:	Buyout payments from former partners	8ł	h.+	\$	200	0.00	+ \$		N/A	-	
9.	Add	all other income. Add lines 8a+8b-	-8c+8d+8e+8f+8g+8h.	9.		\$	7,170	0.00	\$		N/A	A	
					\$. ¢			- \$		
10.		culate monthly income. Add line 7 - the entries in line 10 for Debtor 1 and		10.	۵_		7,170.00	+ 5		N/A	= 5 -	7,170.0	U
			0 ,	_									
11.	Incli othe Do i	ude contributions from an unmarried per friends or relatives.	the expenses that you list in Schedule partner, members of your household, you ded in lines 2-10 or amounts that are not	r dep			•			Schedule 11.	_	0.0	10
	Opc											0.0	
12.		e that amount on the Summary of Sc.	ine 10 to the amount in line 11. The re hedules and Statistical Summary of Certa							12.	\$	7,170.0	0
										l	Combi	ned	_
13.	Do	•	e within the year after you file this forn	n?							month	ly income	÷
		No. Yes, Explain:											

Official Form 106l Schedule I: Your Income page 2

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Fill	in this informa	tion to identify yo	our case:						
Deb	otor 1	Frank Andre	w Passa	relli		Che	eck if this is:		
		Trank Andro	W 1 4334	· Cili			An amended filir	ng	
	otor 2							nowing postpetition chapte of the following date:	er
(Spc	ouse, if filing)						15 expenses as	or the following date.	
Unit	ed States Bankr	uptcy Court for the	: WESTE	RN DISTRICT OF VIRGIN	IIA		MM / DD / YYYY	,	
l	e number nown)								
Of	fficial Fo	rm 106J							
S	chedule	J: Your	Exper	ises				1:	2/15
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.					
		ibe Your House	ehold						
1.	Is this a join								
	■ No. Go to		in a sonar	ate household?					
	□ res. Doe		iii a sepai	ate nousenoid:					
			st file Offici	al Form 106J-2, <i>Expen</i> ses	for Separate House	ehold of De	ebtor 2.		
2.	Do you have	e dependents?	■ No						
۷.	Do not list De	•	_	Fill out this information for	Dependent's relati	ionshin to	Dependent's	Does dependent	
	Debtor 2.	ebioi i and	☐ Yes.	each dependent	Debtor 1 or Debtor		age	live with you?	
	Do not state	the						□ No	
	dependents	names.						Yes	
								□ No	
							_	_ □ Yes □ No	
								☐ Yes	
								_ □ res □ No	
								☐ Yes	
3.	expenses of	enses include f people other t d your depende	han $_{m \Box}$	No Yes				_	
		ate Your Ongoi							
exp				uptcy filing date unless y y is filed. If this is a supp					
the	value of such	n assistance an	non-cash d have inc	government assistance in	you know Your Income		v		
(Off	ficial Form 10	6l.)					Your ex	kpenses	
4.		or home owners and any rent for th		ses for your residence. In r lot.	nclude first mortgage	e 4.	\$	0.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$	0.00	
	•	rty, homeowner's				4b.		0.00	
			•	ipkeep expenses		4c.		0.00	
5.		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. 5.		0.00 0.00	
J.	Additional	iyaye payiii	città fui yu	rai residence, such as no	no equity idalis	5.	Ψ	0.00	

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Deb	tor 1	Frank Andrew Passarelli	Case num	ber (if known)	
6.	Utilit	ins			
0.	6a.	Electricity, heat, natural gas	6a.	\$	0.00
	6b.	Water, sewer, garbage collection	6b.	· ·	0.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	260.00
	6d.	Other. Specify:	6d.		0.00
7.	Food	and housekeeping supplies		\$	350.00
8.		dcare and children's education costs	8.	\$	0.00
9.		ning, laundry, and dry cleaning	9.	\$	50.00
10.	Pers	onal care products and services	10.	\$	25.00
11.	Medi	ical and dental expenses	11.	\$	100.00
12.	Tran	sportation. Include gas, maintenance, bus or train fare.			
		ot include car payments.	12.	·	100.00
13.		rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14.	Char	itable contributions and religious donations	14.	\$	100.00
15.		rance.			
		ot include insurance deducted from your pay or included in lines 4 or 20.	45-	r.	450.00
		Life insurance	15a.	· 	459.00
		Health insurance	15b.	·	249.00
		Vehicle insurance		·	150.00
40		Other insurance. Specify:	15d.	\$	0.00
	Spec	·	16.	\$	0.00
17.		illment or lease payments:	47-	Φ.	
		Car payments for Vehicle 1	17a.	· <u> </u>	0.00
		Car payments for Vehicle 2	17b.	*	0.00
		Other. Specify:	17c.	· ·	0.00
40		Other. Specify:	17d.	>	0.00
18.		payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	2,950.00
19.		r payments you make to support others who do not live with you.		\$	0.00
	Spec		19.	*	0.00
20.		r real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e			
		Mortgages on other property	20a.		0.00
	20b.	Real estate taxes	20b.	\$	0.00
	20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify: Emergency fund	21.	+\$	100.00
22	Colo	ulate your monthly expenses			
22.		ulate your monthly expenses Add lines 4 through 21.		\$	4 003 00
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		ψ	4,993.00
				Ψ	4 000 00
		Add line 22a and 22b. The result is your monthly expenses.		\$	4,993.00
23.		ulate your monthly net income.		•	- 4-0
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	· ·	7,170.00
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	4,993.00
	23c.	Subtract your monthly expenses from your monthly income.	20	6	2,177.00
		The result is your monthly net income.	23c.	Φ	2,177.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes.

Explain here: 15a) Debtor required to keep this term life policy pursuant to his separation agreement and divorce from ex-wife.

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Fill in this infe	ormation to identify your	case:					
Debtor 1	Frank Andrew Pa	ssarelli					
	First Name	Middle Name	Las	st Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Las	st Name			
United States	Bankruptcy Court for the:	WESTERN DISTRIC	T OF VIRGINI	A			
Case number							
(if known)						Check if this is an amended filing	
	orm 106Dec ation About a	n Individua	al Debt	or's Sche	dules		12/15
f two married	people are filing together	, both are equally res	ponsible for s	supplying correct	information.		
obtaining mor years, or both	ney or property by fraud ir n. 18 U.S.C. §§ 152, 1341, 1	connection with a ba				tement, concealing property, 100, or imprisonment for up to	
S	Sign Below						
Did you	pay or agree to pay some	one who is NOT an at	torney to help	you fill out bankı	ruptcy forms?		
■ No							
☐ Yes	. Name of person					nkruptcy Petition Preparer's No n, and Signature (Official Form	
					200.0.00	ri, and eighaidhe (eimeidh i eim	,
	enalty of perjury, I declare are true and correct.	that I have read the si	ummary and s	schedules filed wi	th this declarat	ion and	
X /s/F	rank Andrew Passarelli	i	х				
	nk Andrew Passarelli ature of Debtor 1			Signature of Debt	tor 2		
Date	October 4, 2019			Date			

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Fill	in this inform	ation to identify you	r case:			
Det	otor 1	Frank Andrew P	assarelli Middle Name	Last Name		
Deb	otor 2	Thor Name	Wildle Hame	Last Name		
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	WESTERN DISTRICT OF	VIRGINIA		
1	se number					
(if kn	nown)					Check if this is an amended filing
						amended ming
∩f	ficial For	m 107				
			Affairs for Indivic	luals Filing for B	ankruntov	4/1:
info num	rmation. If monber (if known	ore space is needed,). Answer every que	ble. If two married people a attach a separate sheet to t stion. arital Status and Where You	this form. On the top of any		
				Elved Belole		
1.	wnat is your	current marital statu	IS ?			
	☐ Married	2.4				
	■ Not marr	riea				
2.	During the la	st 3 years, have you	lived anywhere other than v	where you live now?		
	□ No					
	Yes. List	all of the places you l	ived in the last 3 years. Do no	t include where you live now	'.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	15763 Aub Culpeper, \		From-To: 1998 to 9/19	☐ Same as Debtor		☐ Same as Debtor 1 From-To:
3. state	■ No □ Yes. Mal	es include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev medule H: Your Codebtors (Of	/ada, New Mexico, Puerto Ri		
rai	Ехріан	Title Sources of You	rincome			
4.	Fill in the total	I amount of income yo	nployment or from operating ureceived from all jobs and a have income that you receive	ill businesses, including part-	time activities.	ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$5,886.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Fr	ank Andrew Pass	arelli	Case	e number (if known)	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last caler (January 1 to	ndar year: December 31, 2018	Wages, commissions, bonuses, tips	\$7,715.00	☐ Wages, commission bonuses, tips	
		Operating a business		☐ Operating a busines	SS
	dar year before that: December 31, 2017		\$3,630.00	☐ Wages, commission bonuses, tips	ns,
		Operating a business		Operating a busines	SS
winnings. List each	If you are filing a joint	nts; pensions; rental income; inte	you received together, list it o	nly once under Debtor 1.	s, and gambling and lottery
		Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
			exclusions)		and exclusions)
From January the date you	y 1 of current year u filed for bankruptcy:	ntil Social Security & Pension	\$62,730.00		
For last caler (January 1 to	ndar year: December 31, 2018	Social Security & Pension	\$80,555.00		
	dar year before that: December 31, 2017		\$77,044.00		
Part 3: Lis	t Certain Payments \	You Made Before You Filed for	Bankruptcy		
6. Are eithe □ No.	Neither Debtor 1 n	or 2's debts primarily consume or Debtor 2 has primarily const or a personal, family, or househo	u <mark>mer debts.</mark> Consumer debts	s are defined in 11 U.S.C.	§ 101(8) as "incurred by an
	☐ No. Go to lii ☐ Yes List bele paid the not incli	before you filed for bankruptcy, dine 7. by each creditor to whom you part creditor. Do not include payment de payments to an attorney for the nent on 4/01/22 and every 3 year	id a total of \$6,825* or more ints for domestic support oblights bankruptcy case.	n one or more payments ations, such as child supp	port and alimony. Also, do
■ Yes.		2 or both have primarily consubefore you filed for bankruptcy, d		of \$600 or more?	
	□ No. Go to lin	ne 7.			
	include	ow each creditor to whom you pa payments for domestic support o y for this bankruptcy case.			
Creditor	's Name and Addres	s Dates of payme	ent Total amount	Amount you Was	this payment for

Creditor's Name and Address		Dates of payment	Total amount	Amount you	Was this payment for	
			paid	still owe		
Official Form 107	Staten	nent of Financial Affairs for	Individuals Filing for I	Bankruptcy		page 2

Case 19-62091 Doc 1 Filed 10/04/19 Entered 10/04/19 16:03:59 Desc Main Document Page 40 of 66 Frank Andrew Passarelli Debtor 1 Case number (if known) **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... paid still owe The Fauquier Bank 9/19 \$625,210.00 \$8,498.00 Mortgage 10 Courthouse Square ☐ Car Warrenton, VA 20188 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other 9/19 \$0.00 **Culpeper County Treasurer** \$14,910.36 ☐ Mortgage P.O. Box 1447 ☐ Car Culpeper, VA 22701 ☐ Credit Card ☐ Loan Repayment ■ Suppliers or vendors Other RE taxes Nancy Lee Wheeler ■ Mortgage Two payments of \$900.00 \$40,621.00 6946 Louisa Road \$450 ☐ Car Gordonsville, VA 22942 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other Spousal support payments. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe Marlyn Jean Costanzo \$5,000.00 Monthly payments \$1,250.00 Loan repayment. 320 Strokes Creek Dr of \$250 for 5 Saint Augustine, FL 32095 months to sister to repay loan. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No

Total amount

paid

Amount you

still owe

Dates of payment

☐ Yes. List all payments to an insider

Insider's Name and Address

Reason for this payment

Include creditor's name

Case 19-62091 Doc 1 Filed 10/04/19 Entered 10/04/19 16:03:59 Desc Main Page 41 of 66 Document Debtor 1 Frank Andrew Passarelli Case number (if known) Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Status of the case Nature of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? \square No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: Jason Shoop Bedroom suite given to son prior to 9/19 \$3,500.00 1705 Oriole Ct. moving to Florida. Culpeper, VA 22701 Person's relationship to you: Son 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? □ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) **Full Circle Thrift** 9/19 \$1,500.00 Grill, 3 chairs, fishing gear, Culpeper, VA 22701 Goodwill Clothing, appliances and linens 9/19 \$1,500.00

Case 19-62091 Doc 1 Filed 10/04/19 Entered 10/04/19 16:03:59 Desc Main Page 42 of 66 Document Debtor 1 Frank Andrew Passarelli Case number (if known) Gifts or contributions to charities that total Describe what you contributed Value Dates vou more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) **Tithe** \$100.00 **Precious Blood Catholic Church** Monthly Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? ☐ No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. USAA paid \$1500 and debtor paid \$2000 to 7/19 \$3,500.00 Storm damage to home and make repairs. property Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □ No Yes. Fill in the details. Date payment Person Who Was Paid Description and value of any property Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You 9/4/19 Slayton Law, PLC Retainer for costs \$600.00 913 East Jefferson Street Charlottesville, VA 22902 marshall@marshallslayton.com **DECAF** CCC 8/21/2019 \$25.00 112 Goliad St Benbrook, TX 76126-2009 www.bkcert.com John Goetz Law, PLC Attorney Fees from prior Ch. 13 9/19 \$100.00 86 W. Shirley Ave. Warrenton, VA 20186 marshall@marshallslayton.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details.

Address

Person Who Was Paid

transferred

Description and value of any property

Amount of

payment

Date payment

made

or transfer was

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Debtor 1 Frank Andrew Passarelli

Case number (if known)

	Person Who Was Paid Address	Description and v transferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
	Freedom Debt Relief PO Box 2330 Phoenix, AZ 85002-2330	Debt settlement every 2 weeks for 7/19.		•	Past 3 month	\$1,224.00
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers madinclude gifts and transfers that you have already in No Yes. Fill in the details.	iness or financial affa e as security (such as t	nirs? he granting of a s			
	Person Who Received Transfer Address	Description and v property transferr		paymen	e any property or its received or debts exchange	Date transfer was made
	Person's relationship to you William Tatum and Stephanie Gayle 15763 Auburn Rd Culpeper, VA 22701	Sold residence	for \$688,500		sale so no eds to debtor.	10/3/19
	Unknown buyers at JLR Auctions	Miscellaneous h goods and furni could not take t put in storage.	iture debtor	of whice	or a total of \$1,857 ch debtor will e 65% by the end ober.	9/19
19.	Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.		y property to a s	self-settled	trust or similar device	of which you are a
	Name of trust	Description and v	alue of the prop	erty transfe	erred	Date Transfer was made
Par	List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Sto	orage Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accour	nts; certificates	of deposit;		
	Yes. Fill in the details.					
		ast 4 digits of ccount number	Type of accou instrument	1	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, an	y safe depo	sit box or other depos	itory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe th	e contents	Do you still have it?

Page 44 of 66 Document Frank Andrew Passarelli Debtor 1 Case number (if known) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) See items listed on Schedule **Dave's Storage** Debtor ☐ No 11622 Lucky Hill Road B as located at Storage Unit. Yes Remington, VA 22734 Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case

Address (Number, Street, City,

State and ZIP Code)

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☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your case	9:					
Debtor 1	Frank Andrew Passarelli						
Debtor 2 (Spouse, if filing)							
United States B	ankruptcy Court for the:	Western District of Virginia					
Case number (if known)							

Check	Check as directed in lines 17 and 21:						
Check as directed in lines 17 and 21: According to the calculations required by this Statement: 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). 3. The commitment period is 3 years.							
	•						
•	·						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

		,						
Par	11: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check o	ne c	only.					
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2	2-11						
10 th	ill in the average monthly income that you received fro 01(10A). For example, if you are filing on September 15, the e 6 months, add the income for all 6 months and divide the couses own the same rental property, put the income from	e 6-	month period would al by 6. Fill in the res	be Ma sult. Do	arch 1 throu o not includ	gh August 31. If the an e any income amount i	nount of your monthly incommore than once. For examp	ne varied during ble, if both
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overt payroll deductions).	ime	, and commissio	ons (b	efore all	\$	\$	
3.	Alimony and maintenance payments. Do not incommon B is filled in.	clud	e payments from	a spo	use if	\$	\$	
4.	All amounts from any source which are regular of you or your dependents, including child sup from an unmarried partner, members of your hous and roommates. Do not include payments from a syou listed on line 3.	por eho	rt. Include regular lld, your depende	contr	ibutions arents,	\$0.00	\$	
5.	Net income from operating a business, profession, or farm		Debtor 1					
	Gross receipts (before all deductions)	\$	2,66		_			
	Ordinary and necessary operating expenses	-\$	1,76	9.87	_			
	Net monthly income from a business, profession, or farm	\$	89	2.29	Copy here -> S	892.29	\$	
6.	Net income from rental and other real property		Debtor 1					
	Gross receipts (before all deductions)		\$					
	Ordinary and necessary operating expenses		-\$0.00					
	Net monthly income from rental or other real prope	erty	\$0.00	Cop	y here ->	\$ 0.00	\$	

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Debtor 1	Frank Andrew Passarelli		Case number (in	f known)			
			Column A Debtor 1		Column B Debtor 2 or non-filing s		
7 Inte	erest, dividends, and royalties		\$	0.00	\$	•	
	employment compensation		\$	0.00	\$		
	not enter the amount if you contend that the amount received was a bene	fit unde			·		
the	Social Security Act. Instead, list it here:						
		.00					
ber	nsion or retirement income. Do not include any amount received that wanefit under the Social Security Act.		\$\$	1.00	\$		
Do rec dor	not include any benefits received under the Social Security Act or payment as a victim of a war crime, a crime against humanity, or international mestic terrorism. If necessary, list other sources on a separate page and pal below.	nts I or	\$	0.00	\$		
			\$	0.00	\$		
	Total amounts from separate pages, if any.		\$	0.00	\$		
11 Cal					· 		
	Iculate your total average monthly income. Add lines 2 through 10 for ch column. Then add the total for Column A to the total for Column B.	\$	5,363.29	+ \$ _		= \$_	5,363.29
						To	tal average
Part 2:	Determine How to Measure Your Deductions from Income					me	onthly income
12. Co 13. Ca l	py your total average monthly income from line 11					\$	5,363.29
	You are not married. Fill in 0 below.						
	You are married and your spouse is filing with you. Fill in 0 below.						
	You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that was NC dependents, such as payment of the spouse's tax liability or the spouse'						
	Below, specify the basis for excluding this income and the amount of incadjustments on a separate page.	come de	voted to each p	urpose.	If necessary,	list addi	tional
	If this adjustment does not apply, enter 0 below.						
		. \$_					
		. \$_					
		+\$_					
	Total	\$	0.00	Col	oy here=>		0.00
44 V	and a support monthly income. On his office 40 feet 10 and					\$	5,363.29
14. f (our current monthly income. Subtract line 13 from line 12.						-,
15. C a	alculate your current monthly income for the year. Follow these steps	:					
15	5a. Copy line 14 here=>					\$	5,363.29
	Multiply line 15a by 12 (the number of months in a year).					X	12
15	5b. The result is your current monthly income for the year for this part of t	he form				\$	64,359.48

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Debtor	Frank Andrew Passareili	Case n	number (# known)	
16. (Calculate the median family income that applies to yo	u. Follow these steps:		
	16a. Fill in the state in which you live.	VA		
	— 16b. Fill in the number of people in your household.	1		
	· · · · —		_	61,864.00
	16c. Fill in the median family income for your state and si To find a list of applicable median income amounts, instructions for this form. This list may also be availa	go online using the link specified in t	the separate	01,004.00
17. I	How do the lines compare?			
•	17a.			
•	17b. Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcularyour current monthly income from line 14 above.	ation of Your Disposable Income (
Part 3	Calculate Your Commitment Period Under 11 U	.S.C. § 1325(b)(4)		
18. (Copy your total average monthly income from line 11		\$	5,363.29
(Deduct the marital adjustment if it applies. If you are not contend that calculating the commitment period under 11 spouse's income, copy the amount from line 13.			
•	19a. If the marital adjustment does not apply, fill in 0 on li	ne 19a.	- \$	0.00
	19b. Subtract line 19a from line 18.		\$_	5,363.29
	Calculate your current monthly income for the year.	Follow these steps:		E 202 20
2	20a. Copy line 19b		\$	5,363.29
	Multiply by 12 (the number of months in a year).			x 12
2	20b. The result is your current monthly income for the year	r for this part of the form	\$	64,359.48
2	20c. Copy the median family income for your state and si	ze of household from line 16c	\$	61,864.00
			L	
2	21. How do the lines compare?			
	Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	ordered by the court, on the top of	page 1 of this form, check box 3	, The commitment
	■ Line 20b is more than or equal to line 20c. Unlead commitment period is 5 years. Go to Part 4.	ss otherwise ordered by the court, o	on the top of page 1 of this form,	check box 4, The
Part 4	Sign Below			
-	By signing here, under penalty of perjury I declare that the	e information on this statement and i	n any attachments is true and c	orrect.
v	/s/ Frank Andrew Passarelli			
^	Frank Andrew Passarelli			
	Signature of Debtor 1			
[Oate October 4, 2019			
	MM / DD / YYYY f you checked 17a, do NOT fill out or file Form 122C-2.			
		- (O-1' 00 (1' -1'		and Para 4.6
I	f you checked 17b, fill out Form 122C-2 and file it with the	s form. On line 39 of that form, copy	your current monthly income from	om line 14 above.

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Fill in this inform	ation to identify you	ır case:					
Debtor 1 F	rank Andrew Pass	arelli					
Debtor 2 (Spouse, if filing)							
United States Ban	kruptcy Court for the:	Western District of Virg	inia				
Case number (if known)				☐ Che	ck if this is a	n amended f	iling
Official Form 1220 Chapter 1:		n of Your Dis _l	posable Ir	ncome			04/19
To fill out this for Commitment Peri	n, you will need you od (Official Form 122	r completed copy of <i>Cha</i> !C-1).	apter 13 Stateme	ent of Your Current Month	ly Income and	d Calculation	of
space is needed,	attach a separate sh		the line number	ther, both are equally resp to which additional inforr			
Part 1: Calcu	late Your Deduction	s from Your Income					
the questions information made informati	In lines 6-15. To find ay also be available at the sense amounts set out are higher than the so not deduct any amounts differ from month to pers 1-4 are not used	the IRS standards, go of the bankruptcy clerk's in lines 6-15 regardless of tandards. Do not include ints that you subtracted fromonth, enter the average in this form. These numbers	online using the less office. If your actual experience any operating export your spouse's expense. If your actual experience any operating expense is apply to information to the second sec	ense. In later parts of the for benses that you subtracted to income in line 13 of Form	ate instruction, you will use from income in 122C-1.	ns for this fo	rm. This r actual s of Form
Fill in the r plus the nu	umber of people who		mptions on your fe		1	I	
National Stand	ards You m	ust use the IRS National S	Standards to answ	ver the questions in lines 6-7	7.		
		s: Using the number of pont for food, clothing, and o		I in line 5 and the IRS Nation	nal	\$	727.00
the dollar a	amount for out-of-pock o are 65 or olderbec	et health care. The numb	er of people is sp higher IRS allowa	ntered in line 5 and the IRS lit into two categoriespeopance for health car costs. If 22.	le who are un	der 65 and	

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ebtor 1	F	rank Andrew Passarelli				Case number (if	knowr	n)			
Peop	le w	who are under 65 years of age									
-	7a.	Out-of-pocket health care allowance per person	\$	55							
7	7b.	Number of people who are under 65	x	0							
7	7c.	Subtotal. Multiply line 7a by line 7b.	\$	0.00		Copy here=	> \$		0.00		
Peop	le w	vho are 65 years of age or older									
7	7d.	Out-of-pocket health care allowance per person	\$	114							
7	7e.	Number of people who are 65 or older	X	1							
7	7f.	Subtotal. Multiply line 7d by line 7e.	\$	114.00		Copy here=	> \$		114.00		
-	7g.	Total. Add line 7c and line 7f			\$	114.00		Copy to	otal here=>	\$	114.00
Local	l Sta	andards You must use the IRS Local Standards to	n answ	er the auestic	ns in li	nes 8-15					
Base	d oı	n information from the IRS, the U.S. Trustee Prog					d for	housir	ng for		
_	•	ing and utilities - Insurance and operating expen	SAS								
_		ing and utilities - Mortgage or rent expenses	303								
8. I	Hou in th	e instructions for this form. This chart may also busing and utilities - Insurance and operating expense dollar amount listed for your county for insurance as and utilities - Mortgage or rept expenses:	enses:	Using the nu	mber of			d in line	5, fill \$_		519.00
		ising and utilities - Mortgage or rent expenses:	90 % 45								
,	9a.	Using the number of people you entered in line 5, fi listed for your county for mortgage or rent expenses		e dollar amou	nt		\$	1,	222.00		
(9b.	Total average monthly payment for all mortgages a	nd othe	er debts secu	red by	your home.					
		To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.									
		Name of the creditor		Average mo	nthly						
		-NONE-		\$		_					
		9b. Total average monthly paymen	nt S	\$	0.00	Copy here=>	-\$_		0.00	Repeat on line	this amount 33a.
(9c.	Net mortgage or rent expense.	L								
		Subtract line 9b (total average monthly payment) from rent expense). If this number is less than \$0, ent		e 9a (<i>mortgag</i>	ie	\$	1,2	22.00	Copy here=>	\$	1,222.00
	affe	ou claim that the U.S. Trustee Program's division cts the calculation of your monthly expenses, fill plain why:					is in	correct	and	\$	0.00

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Case number (if known)

11.	Local transportation expenses: Check the number of vehic	cles for which you claim	an ownership or operating	expense.	
	☐ 0. Go to line 14.				
	■ 1. Go to line 12.				
	☐ 2 or more. Go to line 12.				
12.	Vehicle operation expense: Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for				242.00
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan of more than two vehicles.				
Ve	hicle 1 Describe Vehicle 1: 2015 Hyundai Sonata 5 Auburn Rd, Culpeper V		cation: 15763		
13a	Ownership or leasing costs using IRS Local Standard		. \$ 508.00		
13b	Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.				
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.		at		
	Name of each creditor for Vehicle 1	Average monthly payment			
	USAA Federal Savings Bank	\$\$			
	Total Average Monthly Payment	\$215.41	Copy here => -\$ 215	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense			Copy net	
	Subtract line 13b from line 13a. if this number is less than \$0	, enter \$0	\$\$	Vehicle 1 expense here => \$	292.59
Ve	hicle 2 Describe Vehicle 2:				
13d	Ownership or leasing costs using IRS Local Standard				
13e	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	Do not include costs fo	or		
	Name of each creditor for Vehicle 2	Average monthly payment			
		\$			
	Total average monthly payment	\$	Copy here => -\$ 0.00	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense			Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0	, enter \$0	\$ 0.00 _	Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of vehicles			the \$	0.00
15.	Additional public transportation expense: If you claimed 1 also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Transp</i>	hat you believe is the a			0.00

Frank Andrew Passarelli

Debtor 1

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Case number (if known)

Oth		In addition to the expense d the following IRS categories		s listed above	, you are allowed your monthly expenses	s for	
16.	self-employment taxes, soc your pay for these taxes. Ho	ial security taxes, and Medic	are taxes	s. You may inc refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.		
	Do not include real estate, s	sales, or use taxes.				\$	0.00
17.	Involuntary deductions: T contributions, union dues, a	he total monthly payroll dedu	uctions th	nat your job re	quires, such as retirement	_	
	, ,		o, such a	s voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	Life Insurance: The total m filing together, include paym	nonthly premiums that you pa nents that you make for your or life insurance on your depe	ay for you spouse's	ur own term life s term life insu	e insurance. If two married people are	\$	459.00
19.	Court-ordered payments: administrative agency, such	The total monthly amount the as spousal or child support			by the order of a court or		
					You will list these obligations in line 35.	\$	0.00
20.	Education: The total month	, , , ,	ducation	that is either i	required:		
	as a condition for your jo						0.00
0.4					ation is available for similar services.	\$	0.00
21.		iy amount that you pay for cr r any elementary or seconda	,	,	sitting, daycare, nursery, and preschool.	\$	0.00
22.	that is required for the healt		depende	ents and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.		
	Payments for health insurar	nce or health savings accour	nts should	d be listed only	y in line 25.	\$	0.00
	3. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.					+\$	0.00
24.	Add all of the expenses all Add lines 6 through 23.	llowed under the IRS expe	nse allov	vances.		\$	3,575.59
Add	itional Expense Deduction	These are additional d					
25.		ty insurance, and health sa	avings ac	ccount expen	ises. The monthly expenses for health ly necessary for yourself, your spouse, o	or	
	Health insurance		\$	249.00			
	Disability insurance		\$	0.00			
	Health savings account	+	- \$	0.00	7		
	Total		\$	249.00	Copy total here=>	\$	249.00
	Do you actually spend this t				_		
	No. How much do y	ou actually spend?	œ				
	– Tes		\$				
26.	continue to pay for the reas your household or member	onable and necessary care a	and supp o is unab	ort of an elder le to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.					nses that you incur to maintain the es Act or other federal laws that apply.		
		the nature of these expense				\$	0.00

Frank Andrew Passarelli

Debtor 1

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ebtor 1	Frank Andrew Passarelli	Case number (if known)			
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance and operating expenses of	nc		
	If you believe that you have home energy of 8, then fill in the excess amount of home er	costs that are more than the home energy costs included in expenses on nergy costs	line		
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must show that the additional ary.		\$	0.00
		dren who are younger than 18. The monthly expenses (not more than expendent children who are younger than 18 years old to attend a private	or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the amount not already accounted for in lines 6-23.			
	* Subject to adjustment on 4/01/22, and eve	ery 3 years after that for cases begun on or after the date of adjustment.		\$	0.00
		the monthly amount by which your actual food and clothing expenses are allowances in the IRS National Standards. That amount cannot be more in the IRS National Standards.			
		ional allowance, go online using the link specified in the separate so be available at the bankruptcy clerk's office.			
	You must show that the additional amount	claimed is reasonable and necessary.		\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organizations.	ial			
	Do not include any amount more than 15%	of your gross monthly income.		\$	100.00
	Add all of the additional expense deduct Add lines 25 through 31.	tions.		\$	349.00
Dedu	uctions for Debt Payment				
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home mortgages, vehicle			
Т		ent, add all amounts that are contractually due to each secured			
	Mortgages on your home			verage aymen	monthly
33a.	Copy line 9b here	=		-	0.00
	Loans on your first two vehicles				
33b.	Copy line 13b here	=:	> \$		215.41
33c.	Copy line 13e here	=	> \$		0.00
33d.	List other secured debts:				
	e of each creditor for other secured debt	Identify property that secures the debt Does payment include taxes or insurance?	i		
		□ No			
	-NONE-	☐ Yes	\$		
			·		
		□ No			
		Yes	\$		
		□ No			
		☐ Yes +	\$		
33e	Total average monthly payment. Add lines	230 through 22d	opy otal ere=>	\$	215.41

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	k Andrew Passarelli			Ou		imber (<i>if known</i>)			
•	-		•	•	e,				
	State any amount that you listed in line 33, to keep po	ssession of your property							
ne of the	creditor	Identify property that se	cures the de	bt	To	tal cure amount			
ONE-				\$	3		÷ 60 = \$	aniount	
				Total	\$	0.00	Copy total here=	> \$_	0.00
					hat				
□ No.	Go to line 36.								
Yes.				de current or					
	Total amount of all past-d	lue priority claims			\$	52,622.00	_ ÷ 60	\$_	877.04
Projecte	d monthly Chapter 13 plar	n payment			\$	1,400.00	_		
Office of he Exec o find a li	the United States Courts (fourtive Office for United States ist of district multipliers that included	or districts in Alabama and s Trustees (for all other di udes your district, go online u	North Caro stricts). sing the link s	lina) or by pecified in the	X	10.00			
Average	monthly administrative expe	ense				\$140.00			140.00
		t payment.						\$	1,232.45
l Deduc	tions from Income								
Add all c	of the allowed deductions.								
			\$	3,575.5	9				
Copy lin	ne 32, All of the additional ex	xpense deductions	. \$	349.0	0				
Copy lir	ne 37, All of the deductions t	for debt payment	. +\$	1,232.4	5	٦			
Total de	eductions		\$	5,157.0	4	Copy total here=	>	\$	5,157.04
	No. Yes. No you care past No. Yes. Yes. No. Yes. Projecte Current r Office of the Exect of find a lie eparate in the exercity of the exect of the execution o	No. Go to line 35. Yes. State any amount that you listed in line 33, to keep por Next, divide by 60 and fill in the of the creditor ONE- Oo you owe any priority claims - sure past due as of the filing date of the creditor No. Go to line 36. Yes. Fill in the total amount of all past-composition of all past-composition of the United States Courts (for the Executive Office for United States of find a list of district multipliers that incluent of the allowed deductions for deb and dall of the deductions for deb and dall of the allowed deductions. Copy line 24, All of the expenses all expense allowances. Copy line 37, All of the deductions of the allowed deductions.	No. Go to line 35. Yes. State any amount that you must pay to a creditor, in listed in line 33, to keep possession of your property Next, divide by 60 and fill in the information below. Identify property that see the creditor ONE- One of the creditor ONE- One of the creditor ONE- No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. ongoing priority claims, such as those you listed in limple total amount of all past-due priority claims. Orojected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by office of the United States Courts (for districts in Alabama and the Executive Office for United States Trustees (for all other diese of the United States of the instructions for this form. This list may also be available at the experage monthly administrative expense Add all of the deductions for debt payment. Add lines 33e through 36. I Deductions from Income Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS expense allowances Copy line 32, All of the additional expense deductions	No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to listed in line 33, to keep possession of your property (called the Next, divide by 60 and fill in the information below. Identify property that secures the de Identify property tax, child support, in the Id	No. Go to line 35. No. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. Identify property that secures the debt DNE- Total No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Diffice of the United States Courts (for districts in Alabama and North Carolina) or by he Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the eparate instructions for this form. This list may also be available at the bankruptcy clerk's office. Noverage monthly administrative expense Add all of the deductions for debt payment. Add lines 33e through 36. Deductions from Income Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS expense allowances Solvenses allowances Solvenses 3,575.5 Copy line 32, All of the additional expense deductions \$ 349.0 Copy line 37, All of the deductions for debt payment 1,232.4	No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. Identify property that secures the debt To DNE- Total So you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by he Executive Office for United States Trustees (for all other districts). Total all of the district multipliers that includes your district, go online using the link specified in the eparate instructions for this form. This list may also be available at the bankruptcy clerk's office. Add all of the deductions for debt payment. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS expense allowances Solvense allowances Solvense allowances \$ 3,575.59 \$ 3,575.59 \$ 349.00 Copy line 32, All of the additional expense deductions \$ 1,232.45	No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. In of the creditor Identify property that secures the debt Total virule amount ONE- Total 1. No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). Add all of the deductions for this form. This list may also be available at the bankruptcy clerk's office. Add all of the deductions for debt payment. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS expense allowances Copy line 37, All of the deductions for debt payment Lorent projects and projects are stated on the list service of the content of the co	No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. Total cure amount Next, divide by 60 and fill in the information below. In ef the creditor Identify property that secures the debt Total cure amount Total cure amount	In No. Go to line 35. In the of the creditor of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. Next, divide by 60 and fill in the information below. Next, divide by 60 and fill in the information below. Next, divide by 60 and fill in the information below. Next, divide by 60 and fill in the information below. Next, divide by 60 and fill in the information below. Next, divide by 60 and fill in the information below. Next, divide by 60 and fill in the information below. In of the creditor length

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Copy your total current monthly income from line 14 of Statement of Your Current Monthly Income and Calcula					\$	5,363.2
D. Fill in any reasonably necessary income you receive for children. The monthly average of any child support payme disability payments for a dependent child, reported in Part received in accordance with applicable nonbankruptcy law necessary to be expended for such child.	ents, foster ca I of Form 122	are payments, o 2C-1, that you	or \$_	0.	.00	
Fill in all qualified retirement deductions. The monthly to employer withheld from wages as contributions for qualified in 11 U.S.C. § 541(b)(7) plus all required repayments of los specified in 11 U.S.C. § 362(b)(19).	d retirement p	olans, as specif		0.	.00	
2. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy	line 38 here	=> \$	5,157	.04	
expenses and you have no reasonable alternative, describ			and			
expenses and you have no reasonable alternative, describ their expenses. You must give your case trustee a detailed circumstances and documentation for the expenses.	e the special	circumstances				
expenses and you have no reasonable alternative, describ their expenses. You must give your case trustee a detailed circumstances and documentation for the expenses.	pe the special d explanation	circumstances of the special				
expenses and you have no reasonable alternative, describ their expenses. You must give your case trustee a detailed circumstances and documentation for the expenses.	pe the special dexplanation	circumstances of the special				
their expenses. You must give your case trustee a detailed	pe the special dexplanation	circumstances of the special Amount of example 1.5 and 1.5 an				
expenses and you have no reasonable alternative, describ their expenses. You must give your case trustee a detailed circumstances and documentation for the expenses.	pe the special dexplanation	circumstances of the special Amount of each state of the special state	Copy		0.00	

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Debtor 1	Fran	k Andrew	Passarelli	Case nu	mber (if known)	
ha tim yo	ve cha ne you u filed	inged or are r case will be your petition	or expenses. If the income in Form 122C-1 or the exvirtually certain to change after the date you filed yo e open, fill in the information below. For example, if the check 122C-1 in the first column, enter line 2 in the in when the increase occurred, and fill in the amount	ur bankruptcy petition ne wages reported in e second column, ex	on and during the ncreased after	
Form		Line	Reason for change	Date of change	Increase or decrease?	Amount of change
■ 122 □ 122	•	5	Loss of rental income from home sharing (AirB&B and VRBO) after house sold and debtor moved to Florida to care for family members. Only SE income is from sale of business and commissions on insurance policies he is getting. \$290.12 is the difference between Line 5 (includes home rental income and expenses) and average income from non-home rental sources	9/30/19	□ Increase ■ Decrease	s 290.12
☐ 122			(\$3613/6=\$602) only.	3/30/13	☐ Increase	
☐ 122					☐ Decrease	\$
□ 122	C-1				☐ Increase	
1 22	C-2				☐ Decrease	\$
☐ 122	-				☐ Increase	
□ 122	C-2				Decrease	\$

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Debtor 1	Frank Andrew Passarelli	Case number (if known)
Part 4:	Sign Below	
	By signing here, under penalty of perjury you	declare that the information on this statement and in any attachments is true and correct.
Х	/s/ Frank Andrew Passarelli	
	Frank Andrew Passarelli	
	Signature of Debtor 1	
Date		
	MM / DD / YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7:	Liquidation
;	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
;	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-62091 Doc 1 Filed 10/04/19 Entered 10/04/19 16:03:59 Desc Main Document Page 62 of 66

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Virginia

		strict of virginia	G. M	
In re	Frank Andrew Passarelli	Debtor(s)	Case No. Chapter	13
			_	
	DISCLOSURE OF COMPENSATION	ON OF ATTORN	NEY FOR DE	BTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certicompensation paid to me within one year before the filing of the poer rendered on behalf of the debtor(s) in contemplation of or in co	etition in bankruptcy, or	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,000.00
	Prior to the filing of this statement I have received			0.00
	Balance Due		\$	4,000.00
2.	310.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensation v	with any other person un	less they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the			
6.	In return for the above-disclosed fee, I have agreed to render legal	l service for all aspects of	f the bankruptcy c	ase, including:
	a. Analysis of the debtor's financial situation, and rendering advice. Preparation and filing of any petition, schedules, statement of a Representation of the debtor at the meeting of creditors and cod. [Other provisions as needed] Negotiations with secured creditors to reduce to reaffirmation agreements and applications as needed 522(f)(2)(A) for avoidance of liens on household	affairs and plan which m nfirmation hearing, and a o market value; exem peded; preparation a	ay be required; any adjourned hear ption planning;	rings thereof;
7.	By agreement with the debtor(s), the above-disclosed fee does not Representation of the debtors in any dischargea any other adversary proceeding.			es, relief from stay actions or
	CERT	IFICATION		
	certify that the foregoing is a complete statement of any agreeme ankruptcy proceeding.	ent or arrangement for pa	syment to me for re	epresentation of the debtor(s) in
	ctober 4, 2019	/s/ Marshall M. Slay		
	ate	Marshall M. Slaytor Signature of Attorney Slayton Law, PLC 913 East Jefferson Charlottesville, VA (434) 979-7900 Fax marshall@marshall	Street 22902 :: (434) 293-5017	,
		Name of law firm	•	

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United States Bankruptcy Court Western District of Virginia

	· · · · · · · · · · · · · · · · · · ·		
re Frank Andrew Passarelli		Case No.	
	Debtor(s)	Chapter	_13
VED			
VEK	IFICATION OF CREDITOR	WAIKIA	
above-named Debtor hereby verifies	that the attached list of creditors is true and c	correct to the best	of his/her knowledge.
te: October 4, 2019	/s/ Frank Andrew Passarelli		
	Frank Andrew Passarelli		

Signature of Debtor

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Passarelli, Frank -

AMERICAN INFOSOURCE LP, AGENT FOR VERIZON PO BOX 248848 OKLAHOMA CITY, OK 73124-8848

BROCK & SCOTT PLLC 484 VIKING DR SUIT 203 WINSTON SALEM, VA 23425

CAPITAL ONE BANK USA N.A. 2365 NORTHSIDE DRIVE, STE. 300 SAN DIEGO, CA 92108

CREDIT ONE BANK ATTN: BANKRUPTCY DEPARTMENT PO BOX 98873 LAS VEGAS, NV 89193

CULPEPER COUNTY TREASURER P.O. BOX 1447 CULPEPER, VA 22701

FIRST PREMIER BANK ATTN: BANKRUPTCY PO BOX 5524 SIOUX FALLS, SD 57117

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